40000004666

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(Address)
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(City/State/Zip/Phone #)
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SESSE TARY OF STATE
TALEMALASSEE, FLORIDA

COVER LETTER

TO: Registration S Division of Co		*		
SUBJECT.	COUNTRYWID	E PROPERTIES, LI	_C	
SUBJECT:		ted Liability Company		
	f Amendment and fee(s) are sub condence concerning this matter			
		FABIO SANTANA		
	Name of Person			
	SANTANA EXPORTS LLC			
	Firm/Company			
	4813 GATEWAY GARDENS DRIVE			
		Address		
	BOYI	NTON BEACH, FL 3343	36	
	City/State and Zip Code SANTANAEXPORTSLLC@GMAIL.COM			
	E-mail address: (1	o be used for future annual report	notification)	
For further information	concerning this matter, please of	all:		
FAI	BIO SANTANA	at (800)	784-9414	
Name	of Person	Area Code & Da	aytime Telephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAI	LING ADDRESS:	STREET/CO	OURIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COUNTRY	<u> MIDE PROPERTIES</u>	<u>, LLC </u>
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appear la Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liability Florida document numberL1000004666	Company were filed on	01/13/2010 and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company her	<u>·e</u> :
SANT	ANA EXPORTS LLC	
The new name must be distinguishable and end with the vull.L.C."	words "Limited Liability Compa	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
·		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regregistered agent and/or the new registered office a		our records, enter the name of the new
Name of Name Background Accord		
Name of New Registered Agent:		ACCOUNTS OF THE PERSON OF THE
New Registered Office Address:	<u> </u>	The contract of the contract o
	. Er	ter Florida street address ♀ 【】 . Florida ♀ ⇔ □
 -	City	Florida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u> <u>Name</u> **Address Type of Action MGRM** FABIO SANTANA **4813 GATEWAY GARDENS DRIVE** ✓ Add BOYNTON BEACH, FL 33436 Remove ☐ Add Remove ☐ Add Remove \square Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) OCTOBER 18 2010 Dated Signature of a member or authorized representative of a member **CLEIA BENACIO** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00